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				TION AND INVOICE/SHIPPING DOC								OMB I	Approved No. 0704-0246 s Feb 28, 2006	
The property of the penaltres of the pen	ublic reporting burden for this collect ving the collection of information. So orate for Information Operations and by for failing to comply with a collection	tion of informa end comments Reports (0704- on of informatio	tion is estimated regarding the control of the cont	ated to average 1 hour per response, including the time is burden estimate or any other aspect of this collection of Jefferson Davis Highway, Suite 1204, Arlington, VA 22 of display a currently valid OMB control number.	or reviewin f informatio 202-4302.	g instruction, includ Respond	tions, searching suggestions should	hing existence for a be awa	eting data sor reducing the re that notwit	rces, gathe ourden, to I hstanding a	ring and Departm ny othe	d maintaining the ent of Defense, W r provision of law,	data needed, and comple ashington Headquarters S no person shall be subjec	ting and Services, at to any
1. FR	OM: (Include ZIP Code)	PLEASE	DO NOT	RETURN TOUR FORM TO THIS ADDRESS.	NE I ONIN		SHEET	NO. OF	5. REQ	JISITION	6.	REQUISITION NU	JMBER	
							7. DATE M	ATERIA	. REQUIRED (	YYYYMMD.	8.	PRIORITY		
2. TO	D: (Include ZIP Code)						9. AUTHOR	RITY OR	PURPOSE					-
						ŀ	10. SIGNAT	URE	<u> </u>	<u> </u>	11	1a. VOUCHER NU	MBER & DATE (YYYYMM	IDD)
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3. SH	IIP TO - MARK FOR	<u>.</u>					12. DATE SI	HIPPED	YYYYMMDD			ь.		
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			•			ŀ	15. AIR MO	VEMENT	DESIGNATO	R OR PORT	REFERE	NCE NO.		
						.								
	PPROPRIATIONS DATA	•											AMOUN	Г
	17*1453.2241 000 411	118 0 068	732 2D	** ***										
ITEM	T				UNIT		ANTITY	SUPF						
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(a)	+ FIGORI VEAD (ONE	POOLEION	(b)	FOR EVOA	(c)	-	(d)	(e)		) (g		(h)		
ļ	* FISCAL YEAR (ONE ** PROPERTY ACCOU								.*					
			-	Y THE JULIAN DATE										
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<u> </u>			<u> </u>	nce Provisions Ashore in Alaska/Overseas)		47.0								
	RANSPORTATION VIA MATS OR MS	TOTAL	TYPE	T	T =	1	PECIAL HAN	119.		DATE		BY	SHEET TOTAL	
R E O	CHECKED BY  PACKED BY	CON- TAINERS	CON- TAINER	DESCRIPTION		IGHT	CUBE		CONTAINERS RECEIVED EXCEPT AS	IYYYYMI	MDD)		0.00	
A P S			ļ				ļ	E	NOTED	DATE		BY	GRAND TOTAL	
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LAE								P	NOTED	DATE		BY	20. RECEIVER'S	
TÑ	PACKED BY							<b>↓</b> ⊺│	POSTED	IYYYYM	MDD)	.   -	VOUCHER NO.	

TOTAL.

## **SAMPLE**

		ORDER F	OR SUPPLIE	S OF	R SERVICES	5		*			PAGE 1 OF
1 CONTRACT/PURC	H ORDER/AGREEMENT NO.	2 DELIVERY O	RDER/CALL NO.	3	. DATE OF ORDER	/CALL	4. REO	UISITION	/PURCH	REQUEST NO.	5, PRIORITY
1	-04-M-A013	Z. DELIVERT O	IIDEINOALL IIO		(YYYYMMMDD) 2003OCT	01				4-9Z14	
6. ISSUED BY		CODE	-	7. ADMII	NISTERED BY (If ot	her than 6	5) (	ODE			8. DELIVERY FOB
EOOD SERVI	CE OFFICER	<u> </u>			•						DESTINATION
											OTHER (See Schedule if
FOOD SERVICE OFFICER NAS, BLDG 626 WILLOW GROVE, PA 19090-5010  O CONTRACTOR  VINELAND SYRUP P.O. BOX 213 VINELAND, NJ 08360  FOOD SERVICE OFFICER NAS, BLDG 626  WILLOW GROVE, PA 19090-5010  15. PAYMENT WILL BE MADE BY  CODE  DFAS-NORFOLK, CODE NITT 1837 MORRIS STREET, SUITE 1401 NORFOLK, VA 23511-3431  16. TYPE OF PURCHASE PURCHASE PURCHASE PURCHASE PURCHASE  Reference your  ACCEPTANCE THE CONTRACTOR HERERY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCH.			other)								
9. CONTRACTOR		CODE		FA	CILITY					INT BY (Date)	11. X IF BUSINESS IS
•		<u> </u>			•		,,,,			r08	SMALL
VINEI	LAND SYRUP					,	12. DIS	COUNT			SMALL DISAD- VANTAGED
AND P.O. B									NET		WOMEN-OWNED
VINEI	LAND, NJ 08360				•		13. M/	AIL INVOI	CES TO	THE ADDRESS IN	I BLOCK
						-			~~~		
14. SHIP TO		CODE						_	N6873	2	MARK ALL PACKAGES AND
FOOD SERVI	CE OFFICER										PAPERS WITH
		••						E 140.	l		IDENTIFICATION NUMBERS IN
		10		NOK	OLK, VA Z	2211-3	-12 I				BLOCKS 1 AND 2.
IB. CALL	This delivery order/cal	l is issued on and	other Government a	agency o	r in accordance wit	th and sub	ject to t	erms and	conditio	ns of above numl	bered contract.
TYPE	Reference your										
ORDER PURCHASE	ACCEPTANCE THE	CONTRACTOR H	EREBY ACCEPTS 1	THE OFF	ER REPRESENTED	BY THE N	UMBER	D PURCH	TO PER	DER AS IT MAY FORM THE SAM	PREVIOUSLY HAVE E.
	DELIA OLLIO 14044 MIC										
						TYPED	NAME A	ND TITL	Ē		DATE SIGNED (YYYYMMMDD)
			rn the following nu	mber of	copies:	· · · · · · · · · · · · · · · · · · ·					
17. ACCOUNTING A	ND APPROPRIATION DATA/L	OCAL USE									
T								21.			
18. ITEM NO.	PURCHASE  RECTOR  CODE  FACILITY  TO DELIVER TO FOB POINT BY (Dete) 2003OCT08  SM NET  12. DISCOUNT TERMS NET  NET  WC NET  15. PAYMENT WILL BE MADE BY  CODE  15. PAYMENT WILL BE MADE BY  CODE  15. PAYMENT WILL BE MADE BY  CODE  DFAS-NORFOLK, CODE NITT  PAC PAC BLDG 626  OW GROVE, PA 19090-5010  DELIVERYOUTH ADDRESS IN BLOCK  TO CODE  15. PAYMENT WILL BE MADE BY  CODE  NORFOLK, CODE NITT  PAC PAC PAC BLDG 626  NORFOLK, VA 23511-3431  DELIVERYOUTH ADDRESS IN BLOCK  This delivery order/call is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered cont NORFOLK, VA 23511-3431  Reference your  ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUS  BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.  NAME OF CONTRACTOR  SIGNATURE  TYPED NAME AND TITLE  DAT (YYY)  SOUND THE SAME AND TITLE  DAT (YYY)  SOUND THE SAME AND APPROPRIATION DATA/LOCAL USE	23. AMOUNT									
1 83	RUP, LEMON-LIN	/CC					4	со		22.50	\$90.00
3,	ROF, LEMON-LIN	/ILL									•
,										\$22.50	\$180.00
2 SY	TRUP, COLA						8	CO		\$22.50	\$180.00
	*				•			i			
3 53	* YRUP, ROOT BEEF	t .					2	co		\$22.50	\$45.00
		-			-		_			'	
<del></del>		24 UNITED ST	TATES OF AMERIC	A				LL		25. TOTAL	\$315.00
same as quantity or	ed by the Government is dered, indicate by X.	1								26.	4515.00
If different, enter ac quantity ordered and	ctual quantity accepted below d encircle.	BY:			Ç	ONTRACT	'ING/ORI	DERING C	FFICER	DIFFERENCES	
	COLUMN 20 HAS BEEN	1	<del></del>							<u> </u>	
INSPECTED		CEPTED, AND C	ONFORMS TO CEPT AS NOTED:								
b. SIGNATURE OF	AUTHORIZED GOVERNMENT				DATE YYYYMMMDD)				TITLE OF	AUTHORIZED G	OVERNMENT
1				'		REPF	RESENTA	AIIVE			
										lao ::::::::::::::::::::::::::::::::::::	
e. MAILING ADDRE	SS OF AUTHORIZED GOVER	NMENT REPRES	ENTATIVE	28	. SHIP. NO.	29. D.O	. VOUC	HER NO.		30. INITIALS	
				<u> </u>	Taxare :					22 440 5	VEDIEIED CORRECT FOR
				_ -	PARTIAL	32. PAII	D BY			33. AMOUNT	VERIFIED CORRECT FOR
f. TELEPHONE NUI	MBER g. E-MAIL ADDRE	55		34	. PAYMENT	1				34. CHECK NU	JMBER
00 1 05555	AGGOLINE IS GODDEGT 100	DOODED FOR D	AVMENT	- 37	COMPLETE					J. J. ILOR 190	
	ACCOUNT IS CORRECT AND SIGNATURE AND TITLE OF			+	PARTIAL					35. BILL OF LA	ADING NO.
(YYYYMMMDD)				-	FINAL						
37. RECEIVED 38	B. RECEIVED BY (Print)		39. DATE RECEIV	/ED 40	. TOTAL CON-	41. S/R	ACCOU	NT NUMI	BER	42. S/R VOUC	HER NO.
AT			(YYYYMMMD	וסי	TAINERS						
						1					

## SAMPLE

Standard Form 1080								VOUCHE	R NO.	
· ·		VOUCHE	EOD T	DANCEED	•					
Revised April 1982	DETA			RANSFERS				SCHEDU	LE NO.	
Department of the Treasury	BEIW	EEN APPRO	PRIATIC	N2 AND/O	K FUNDS					
1 TFRM 2-2500								BILL NO.		
1080-109 Department, establishment, bureau, or	office billing				•					
Dopartition, Colosioninsin, Sarous, Or	Omoc sinning									
								1		
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Department, establishment, bureau, or	office billed					<del></del>	·	ł		
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•										
DATE OF							QUAN	UNIT	PRICE	AMOUNT
ORDER NO. DELIVERY		. A	RTICLES C	OR SERVICES			TITY	COST	PER	DOLLARS AND CENTS
<ul> <li>* FISCAL YEAR (ONE</li> </ul>	POSITIO	ON) USE '4' FC	R FY 04							
** PROPERTY ACCOU										
		FOLLOWED B	3Y THE J	ULIAN DATE	<u>=</u> )		1			
*** COST CODE (TWEL	VE POSI	TIONS)								
1st Position	0 (Zero)									
2nd Posiion		E CODE (R, V	, or N)							
3rd thru 7th Pos	UIC							l		, i
8th thru 12th Pos		Subsistence A					İ			
	•	Subsistence P					<u> </u>	L	TOTAL	
Remittance in payment hereof should it		Subsistence P	rovisions /	Asnore in Ala	aska and Ov	erseas	<u>l</u>		TOTAL	
, , , , , , , , , , , , , , , , , , ,										
		ACCOUNTING	2 CL ASS	IEICATION -	Rilling Off	ice (Offic	o Reci	aivina	Funds)	
		Bureau Cont.	Auth.	l logitor-	Property	T	e nec	orving i	unusj	
Appropriation Symbol and	Object	and Suballot.	Acctg.	Туре	Acctg.	Cos	Code			Amount
Subhead	Class	No.	Activity		Activity					
17*1453.2241	007	41118 0	68732	3C	**	***				
					·					
		-				<u> </u>				
	•		CERTIFI	CATE OF O	FFICE BILL	ED				· · · · · · · · · · · · · · · · · · ·
I certify that the above arti-	cles were r	eceived and acc	epted or the	e services perf	ormed as stat	ed and sho	uld be o	charged	to the ap	propriation(s)
and or fund(s) as indicated be			•	,				_	·	
( )		•		• • •		•				
							(Auth	norized adi	ninistrative	or certifying officer)
	(Date)		•						(Title)	
		ACCOUNTING	G CL ASS	IFICATION -	Office Rill	ed (Office	Char	ged)	<del></del>	
The accounting of	laccific								49 If	the accounting
		specified, a								
Ciassilicatio	/11 IS 11U	. specilieu, a		e released		tanı it De	IVIC I	nears	unu/Ul	wain saiss
			aı	e i cicaseu	ioi saic.					
Paid by Check No.										
i										

Control of the cont						4		١.	+	CI.	24050
Control Device   Cont	ACTIVITY	USS SAMUEL	B ROBERTS	PERIOD	1-31 October 2003	OPER 3		PORT 25	T	OIC OIC	70517 N / N
100   100				RECTED REPORT?					FINAL RETUR	N-2	Y/N
1,200   1,20	RATIONS ALLOWED	TATEMENT									
Auto-colored   1,100	Navy Rations Allowed	28,352		STUBOLIC							
10   10   10   10   10   10   10   10	Other Rations Allowed	3,297		INVENTORY Balance Brought Forward	1			LEVEL OF PRO	CUREMENT		
Type	OLAL RAHOWS ALLOWED	0.0		RECEIPTS WITH CHARGE	1 1						10,000
Type	RATION BREAK			RECEIPTS WITHOUT CHARGE	- 1		RECEIPTS	WITH CHARGE	- TNEMENT		150
Control   Cont	Type	ode	tions Fed	TOTAL			less. I'vel	SALES	-		780
Control   Cont	l. l	-	2,300				2000				18,570
Control   Cont	Ration For Cash	2 0	682								
Control   Cont	Navy Reserve	6 4		Į.	1 1						40 570
	Navel Academy 1/	2	1   129	OST (338)	1		TOTAL RE	CEIPTS less TRAN	ISFERS and BULK	SALES	18,570
Part   Part	Marine Regular	9		(,S	009		TOTAL ALI	OWANCES less u	NDER/(OVER) 133	7	71,000
Designation   State   Control   Co	Marine Reserve	7							= OITØ		0.6861
Page   Page	Army Regular	8	128						2		
1	Army Reserve	6		Ι.	001						
Table   Tabl	Army Nat Guard	10A		OBY Relative on Hand	12.500	_	Ratio less t	han 1.00 means put	chases, transfers an	d sales	
1	AF Nat Guard	11		ADJUSTMENT			were less t	nan allowances.			
1	Coast Guard 1/	12		TOTAL	Li						
15   14   117   118		13				+					
15   15   15   15   15   15   15   15	Miscellaneous 1/	14	117			1					
16   16   17   18   18   18   18   18   18   18	TARS 1/	15		0.000	+	- 1		I AST FIL	I PHYSICAL INVE	NTORY	
17   3,244   DINDERIO CRESS   2,260   CAR   2,200   NINIMERIO OF DAYS SINCE	Total Other Pers 2/	16	994		2	3		DATE			30-Sep-03
Part   Part	Grand Total 3/	17	3,294	BASIC ALLOW ANCE		`_		NUMBER OF D	4YS SINCE		31
1,550   1,55				ONDER(OVER) ISSUE OF				INVENTORY AC	SCURACY RATE		96.45%
CASH STATEMENT   CASH	1/ Prepare certification in accordance with			100 TO 149							
TOTAL ALLOWANCE   TOTAL ALLO	Pood Service Managelifelt, NAVSOF			OTHER							
TOTAL ALLOWANCE   TOTAL ALLO	Publication 48b, Grapher 2, Volume 1.										
CASH STATEMENT   CONTRA CLASS   CO	3/ Codes 1 and 16.										
TOTAL ALLOWANCE   1707AL ALLOW				-			-				
CONTRICTOR   CON				TOTAL ON SAIDE		27.066					
NOTE   STATEMENT				FOOD COST (338)		26,219	STORES	CONSUMED (1059)			26,795
12   12   12   12   12   12   12   12				UNDER/(OVER) ISSUE		847					
137   CERTIFICATION   COLUMENTS COMMENTS   CONTINUES COMMENTS   CERTIFICATION   COLUMENTS COMMENTS   CERTIFICATION   COLUMENTS   CERTIFICATION   COLUMENTS   CERTIFICATION   COLUMENTS   CERTIFICATION   COLUMENTS   CERTIFICATION   COLUMENTS   COLUMENTS   CERTIFICATION   COLUMENTS   CERTIFICATION   COLUMENTS   COLUMENTS   COLUMENTS   CERTIFICATION   COLUMENTS   COLUMENTS   COLUMENTS   COLUMENTS   COLUMENTS   CERTIFICATION   COLUMENTS   CERTIFIED BY SIGNATURE)   CERTIFIED BY SIGNATURE   CERTIFIED BY SIGNATURE)   CERTIFIE	CASH STATE	MENT							1000 CT	EO CONICI INVE	.2 15%
+         4,068         COUNTRY CODE         SUB         SUB         COUNTRY CODE         AME         SUB         TRANS         TRANS         AME         TRANS         AME         TYPE         PAA         COST CODE         AME           -         2,672         3C         0C00/MING CLASSIFICATION         17 4 1453         2241         0O7         4118         0         68732         3C         003304         0V2135273170         \$ 2           -         2,672         3C         SURCHARGES O&MN         17 4 1453         2241         0O7         4118         0         68732         3C         003304         0V2135273170         \$ 2           CERTIFICATION         DATE         SURCHARGES O&MN         17 4 14694         A	!			% UNDER/(OVER) ISSUE		3.13%	בידות	ACE BELIVIER T	0000000	200000	2
137   138	STK	4,068									
CERTIFICATION		280		COUNTRY CODE	BUS	GBO	L				-
\$1,813   SALES   17 4 1453   2241   007 4118   0 68732   3C 003304   0VZ135Z3770   \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		2,672		ACCOUNTING CLASSIFICATION	Н	CLASS	Ц	AAA	PAA		AMOUNT
\$1,813  SURCHARGES O&MN  17 4 1804  TOTAL  LLECTION  DO  COMMENTS:  2040  8432  31-Oct-2003  COMMENTS:  Column are correct to the best of my knowledge  and belief.  and belief.  EXECUTIVE/PERSONNEL OFFICER (SIGNATURE)  (DATE)  SURCHARGES O&MN  REVIEWED BY LEADING MS (SIGNATURE)  REVIEWED BY LEADING MS (SIGNATURE)  (I CERTIFY that the above information is correct to column are correct to the best of my knowledge and belief.  and belief.  EXECUTIVE/PERSONNEL OFFICER (SIGNATURE)  (DATE)  (DATE)  (DATE)  (CERTIFIED BY (SIGNATURE) (RANK AND TITLE) (DATE)	OTHER SALES OF MEALS -	0		SALES	65	200		68732	003304		- 1
TOTAL	UNDEPOSITED SALES	\$1,813		SURCHARGES ORMN	17 4 1804						12
NLLECTION DO SIGNATURES/COMMENTS REVIEWED BY LEADING MS (SIGNATURE)  2040 8432 31-Oct-2003 COMMENTS:  COMMENTS:  The figures contained in the "RATIONS ALLOWED" (Terriffy that the above information is correct to column are correct to the best of my knowledge and belief.  and belief.  EXECUTIVE/PERSONNEL OFFICER (SIGNATURE) (DATE)  (CERTIFFY that the above information is correct to the best of my knowledge and belief.  (CERTIFFY that the above information is correct to the best of my knowledge and belief.  (COLUMN AREA COLUMN AREA				TOTAL							1 1
NULECTION DO DATE SIGNATURES/COMMENTS  2040 8432 31-Oct-2003 COMMENTS:  COMMENTS:  COMMENTS:  Column are correct to the best of my knowledge and bellef  Column are correct to the best of my knowledge  COLUMN ARE COLUMN ARE CONTIVE/PERSONNEL OFFICER (SIGNATURE) (DATE)  COLUMN ARE COLUMN ARE CONTIVE/PERSONNEL OFFICER (SIGNATURE) (DATE)  COLUMN ARE COLUMN ARE CONTIVE/PERSONNEL OFFICER (SIGNATURE) (DATE)  COLUMN ARE CO	CERTIFICA	lon									
3UCHER#       SYMBOL       DATE       SIGNATURES/COMMENTS:         2040       6432       31-Oct-2003       COMMENTS:         203MD000273       The figures contained in the 'RATIONS ALLOWED'       I CERTIFY that the above information is correct to column are correct to the best of my knowledge         and belief.       and belief.         EXECUTIVE/PERSONNEL OFFICER (SIGNATURE)       (DATE)	1	COLLECTION					24/10/1	D DV I EADING MG	(SIGNATIBE)		
2040 8432 31-Oct-2003 COMMENTS:  Column are correct to the best of my knowledge and belief.  and belief.  EXECUTIVE/PERSONNEL OFFICER (SIGNATURE) (DATE)  COMMENTS:  COMMENTS:  Column are correct to the best of my knowledge and belief.  CERTIFIED BY (SIGNATURE) (RANK AND TITLE)	OFFICER	VOUCHER #					KEVIEW	D BI LEADING IN	(SIGNALONE)		
The figures contained in the 'RATION'S ALLOWED' I CERTIFY that the above information is correct to column are correct to the best of my knowledge the best of my knowledge and belief.  and belief.  EXECUTIVE/PERSONNEL OFFICER (SIGNATURE) (DATE) CERTIFIED BY (SIGNATURE) (RANK AND TITLE)		2040		COMMENTS:							
203MD000273 The figures contained in the 'RATIONS ALLOWED' I CERTIFY that the above information is correct to column are correct to the best of my knowledge the best of my knowledge and belief.  and belief.  EXECUTIVE/PERSONNEL OFFICER (SIGNATURE) (DATE) CERTIFIED BY (SIGNATURE) (RANK AND TITLE)											
column are correct to the best of my knowledge the best of my knowledge and belief.  and belief.  EXECUTIVE/PERSONNEL OFFICER (SIGNATURE) (DATE)  CERTIFIED BY (SIGNATURE) (RANK AND TITLE)		/2135203MD000273		The figures contained in the 'RATIONS	ALLOWED.		ICERTIF	that the above in	formation is correc	t to	
and belief.  EXECUTIVE/PERSONNEL OFFICER (SIGNATURE) (DATE)  CERTIFIED BY (SIGNATURE) (RANK AND TITLE)				column are correct to the best of my k	owledge		the best o	of my knowledge a	nd belief.		
EXECUTVEIPERSONNEL OFFICER STORY (M.E.)	CERTIFICATION: I certify that I have received cash in t.	0		and belief.	I	***************************************	CEDTIE	D BY (SIGNATURE	RANK AND TI	rLE) (DATE)	
above, which will be included in my statement of accordinated in	amount of \$2,672.41, representing deposits described			EXECUTIVE/PERSONNEL OFFICER (S	1		1				
	above, which will be included in my statement of accou	tability									

RATIONS ALLOWED STATEN  RATIONS ALLOWED  SALLOWED  SALLOWED  FYPE  RATION BREAKDOWN  (7)	PERIOD RECTED REPORT? Y/N RECEIPTS	OPER		MERGED RETURN?	<u> </u>
Nations Allowed   National Statement     National Statement	RECTED REPORT? V/N			ENA! DETIEN	_
Nations Allowed   Nations Allowed   National Plane   Na	RECEIPTS			FINAL RESONA	N/ Y N
Interest   Interest	RECEIPTS				
S ALLOWED   O   O	RECEIPIS				
TTON BREAKDOWN  Code  1 1 2 3 3 4 4 4 4 7 7 7 7 10 10 11 11	INVENTORY Balance Brought Forward   \$		1	LEVEL OF PROCUREMENT	
YPE   Code   C	S WITH CHARGE			L	
/ype Code  1 1 2 2 3 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	RECEIPTS WITHOUT CHARGE		RECEIPTS WI	RECEIPTS WITH CHARGE	
			less: BULK S	1 1	
	EXPENDITURES	1	TOTAL BECE	IPTS less TRANSFERS and BULK S	SALES
	+ +		TOTAL ALLOV	TOTAL ALLOWANCES less UNDER/(OVER) ISSUE CF	JECF
	THOUT SURVEY				
	1 1			RATIO =	
	TRANSFERS W/ REIMBURSEMENT +				
	.		Betto less than	Bailo less than 1 00 means purchases, transfers and sales	nd sales
	INVENTURY BRIDGE OF HAND		were less than allowances.	allowances.	
				1 ACT EILL DUVEICAL INVENTORY	VACTA
Total Other Pers 2/ 16	ALLOWANCES RATIONS	ONS HATE VALUE		DATE	
Grand Total 3/	BASIC ALLOWANCE			NUMBER OF DAYS SINCE	
Try to the state of the state o	GADE IN COLUMN			INVENTORY ACCURACY RATE	%
To Prepare Certification in accordance with Food Service Management, NAVSUP	100 TO 149				
Publication 486, Chapter 2, Volume 1.	ОТНЕЯ				
2/ Codes 2 through 15.					
3/ Codes 1 and 16,					
Land Control of the C					
	TOTAL ALLOWANCE	-	STORES CO	STORES CONSUMED (1059)	
	FOOD COST (338)		DO BUOLO	(con) Campon	
1410 0040	UNDER/OVER) ISSUE				
LINDEPOSITED BAL FWD	% UNDER/(OVER) ISSUE		DIFFERENCE	DIFFERENCE BETWEEN FOOD COST & STORES CONSUME	ES CONSUME
SALE OF MEALS +					
	COUNTRY CODE	SUB OBJ	L	TRANS	Н
CASH DEPOSITED WITH D.O.		10P HEAD CLASS	¥	E PAA	COST CODE AMOUNT
	SALES 17.3 1453	2241	41118 0	98/32 30	
UNDEPOSITED SALES		804			8
	TOTAL				
CERTIFICATION					
G COLLECTION	DATE CICINATI IDEC/COMMENTS		REVIEWED	REVIEWED BY LEADING MS (SIGNATURE)	
OFFICER	COMMENTS				
(SIGNATURE) (DATE)					
	The finites contained in the 'BATIONS ALLOWED'	WED.	I CERTIFY th	I CERTIFY that the above information is correct to	ot to
STANDARD DOC. NO.	column are correct to the best of my knowledge	eß	the best of m	the best of my knowledge and belief.	
CERTIFICATION: I certify that I have received cash in the	and bellef.	í	CEDTICED	CEDTIETED BY (SIGNATURE) (BANK AND TITLE)	TLE) (DATE)
emount of \$ , representing deposits described	EXECUTIVE/PERSONNEL OFFICER (SIGNATE	URE) (DAIE)	Centrico	1	ŧΙ
above, which will be included in my statement of accountability					